

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>13372</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>MARK</u> <u>H</u> <u>ELLIS</u> P.O. Box, Bldg., Room No., if any <u></u> Street <u>2700 S CLAIBORNE AVE</u> City <u>NEW ORLEANS</u> State <u>Louisiana</u> ZIP Code + 4 <u>70125-3923</u>	4. Name, file number, and address of labor organization. Name <u>LONGSHOREMENS ASN AFL-CIO LU 3000</u> Labor Organization File Number <u>513-292</u> P.O. Box, Building and Room Number, if any <u></u> Street <u>2700 S CLAIBORNE AVE</u> City <u>NEW ORLEANS</u> State <u>Louisiana</u> ZIP Code + 4 <u>70125-3923</u>
5. Position in labor organization. <u>SECRETARY-TREASURER</u>	

Enter appropriate data below. If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

<p>A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.</p>	
<p>6. Name and address of Employer (including trade name, if any):</p> <p>Name <input style="width: 90%;" type="text"/></p> <p>Trade Name, if any: <input style="width: 90%;" type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input style="width: 80%;" type="text"/></p> <p>Street <input style="width: 90%;" type="text"/></p> <p>City <input style="width: 90%;" type="text"/></p> <p>State <input style="width: 20%;" type="text"/> ZIP Code + 4 <input style="width: 20%;" type="text"/></p>	<p>7.a. Nature of Interest, Transaction, or Income.</p> <div style="border: 1px solid black; height: 150px; margin: 5px 0;"></div> <p>7.b. Amount.</p> <div style="border: 1px solid black; width: 150px; float: right; text-align: right; padding: 5px;">\$0</div>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

On

Date _____

(504) 897-6203

Telephone Number

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name INVESCO

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1360 PEACHTREE ST NE STE 100

City ATLANTA

State Georgia ZIP Code + 4 70130

9. Business deals with:

- ☐ a. Labor Organization
- ☒ b. Trust
- ☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name NEW ORLEANS EMPLOYERS-ILA PWV&H FUNDS

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 147 CARONDELET ST STE 300

City NEW ORLEANS

State Louisiana ZIP Code + 4 70130

11.a. Nature of such dealing.

PWV&H INVESTMENT MANAGER

11.b. Approximate dollar value of such dealing.

\$163,201

12.a. Nature of interest held or income received.

MEAL, DECEMBER 1, 2004

12.b. Amount.

\$751

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

14.b. Amount of payment.

Name of Person Filing MARK ELLIS

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name UBS GLOEAL ASSET MANAGEMENT INC

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street ONE NORTH WACKER DR

City CHICAGO

State Illinois

ZIP Code + 4 60606

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name NEW ORLEANS EMPLOYERS-ILA PWV&H FUNDS

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 147 CARONDELET ST STE 300

City NEW ORLEANS

State Louisiana

ZIP Code + 4 70130

11.a. Nature of such dealing.

PWV&H INVESTMENT MANAGER

11.b. Approximate dollar value of such dealing.

\$144,452

12.a. Nature of interest held or income received.

MEAL, DECEMBER 2, 2005

12.b. Amount.

\$100

Name of Person Filing MARK ELLIS

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name ROBEIN, URANN & LURYE

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 2540 SEVERN AVE

City METAIRIE

State Louisiana ZIP Code + 4 70002

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

UNION'S LAW FIRM

11.b. Approximate dollar value of such dealing.

\$36,000

12.a. Nature of interest held or income received.

GREENS FEES CHARITY GOLF TOURNAMENT, JUNE 4, 2004

12.b. Amount.

\$60

Part B Continuation Page

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8. Name and address of Business (including trade name, if any).

Name ROBEIN, URANN & LURYE

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 2540 SEVERN AVE

City METAIRIE

State Louisiana ZIP Code + 4 70002

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name NEW ORLEANS EMPLOYERS-ILA PWV&H FUNDS

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 147 CARONDELET ST STE 300

City NEW ORLEANS

State Louisiana ZIP Code + 4 70130

11.a. Nature of such dealing.

PWV&H FUNDS CO-COUNSEL

11.b. Approximate dollar value of such dealing.

\$103,000

12.a. Nature of interest held or income received.

GREENS FEES CHARITY GOLF TOURNAMENT, JUNE 4, 2004
(PREVIOUSLY REPORTED)

12.b. Amount.

\$60

Name of Person Filing MARK ELLIS

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name ROBEIN, URANN & LURYE

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 2540 SEVERN AVE

City METAIRIE

State Louisiana ZIP Code + 4 70002

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name NEW ORLEANS EMPLOYERS-ILA ROYALTY FUND

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 147 CARONDELET ST STE 300

City NEW ORLEANS

State Louisiana ZIP Code + 4 70130

11.a. Nature of such dealing.

ROYALTY FUND CO-COUNSEL

11.b. Approximate dollar value of such dealing.

\$0

12.a. Nature of interest held or income received.

GREENS FEE CHARITY GOLF TOURNAMENT, JUNE 4, 2004
(PREVIOUSLY REPORTED)

12.b. Amount.

\$60

Name of Person Filing MARK ELLIS

File Number U-

Part B Continuation Page

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8. Name and address of Business (including trade name, if any).

Name NEW ORLEANS EMPLOYERS-ILA ROYALTY FUND

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 147 CARONDELET ST STE 300

City NEW ORLEANS

State Louisiana ZIP Code + 4 70130

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

11.a. Nature of such dealing.

UNION IS CO-SPONSOR OF BENEFIT PLANS

11.b. Approximate dollar value of such dealing.

\$2,757,818

12.a. Nature of interest held or income received.

WAGES \$57,456
BENEFITS \$11,130
TRAVEL, ILA DISTRICT CONVENTION, JULY 18-23, 2004
\$1,479

12.b. Amount.

\$70,065

Name of Person Filing MARK ELLIS

File Number U-

Part B Continuation Page

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8. Name and address of Business (including trade name, if any).

Name NEW ORLEANS EMPLOYERS-ILA PWV&H FUNDS

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 147 CARONDELET ST STE 300

City NEW ORLEANS

State Louisiana ZIP Code + 4 70130

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

UNION IS CO-SPONSOR OF BENEFIT PLANS

11.b. Approximate dollar value of such dealing.

\$5,853,019

12.a. Nature of interest held or income received.

INTERNATIONAL FOUNDATION OF EMPLOYEE BENEFIT PLANS
ANNUAL CONFERENCE REGISTRATION FEE, DECEMBER 1-4,
2004

12.b. Amount.

\$915